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## SOME REMARKS ON THE TECHNIQUE OF THE MODERN TONSIL OPERATION, AND THE POST-OPERATIVE TREATMENT


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The increasing frequency of operations on the tonsil has made it compulsory for every nurse to have an intelligent knowledge of the operation itself, and the precautions that should be taken afterwards in safeguarding the patient from complications. Not many years ago, a much more simple, but less efficient, operation was done, and the services of a nurse were considered more of a luxury than a necessity. It was then looked upon by the surgeons as a trivial and minor operation, and merely consisted in the amputation of that part of the tonsil which projected into the throat, or which could be encircled by the loop of an ordinary tonsillotome. This method left a comparatively small wound, but also left the most troublesome part of the tonsil—the part covered by the anterior and posterior folds or pillars.

Recurrences of trouble following this operation were frequent; so that to-day more radical measures have been instituted with a view to removing the buried portion referred to. In many cases the tonsils are completely buried behind the pillars, and often as a result of past inflammations adherent to them. These "buried" tonsils often show infected crevices or crypts in their interior so that while they may be insignificant in size, they frequently contain masses of infective material which is absorbed into the system.

The main idea in the operation as performed to-day consists in loosening the tonsil from the pillars which surround it, so that the tonsil moves freely in its bed, or gives one the impression that the tonsillar mass remains attached by a pedicle or stem, rather than by a broad base. If the tonsil is now seized with a pair of forceps and drawn out of its cavity, a whitish glistening membrane can be seen surrounding that part of it which up till now has remained hidden. This is called the capsule of the tonsil. This surrounding capsule enables us to strip out or enucleate the whole tonsillar mass intact, with the exception of the pedicle-like attachment above referred to. If the loop of a tonsillotome, or, better, a tonsil snare, be passed over the tonsil, the entire mass can be cut or squeezed off. The pillars are

thus left intact and there is now a smooth cavity formerly filled with the tonsillar mass. In this method there is apt to be more or less bleeding from vessels severed in the deeper parts of the cavity. However, if the tonsil has been stripped out rather than dissected out, and the wire snare is used, we are less likely to have hemorrhage as a complication.

Now what assistance can a nurse render the operator in this technical procedure, because rapidity as well as accuracy on the part of the surgeon is necessary, and everything must be gotten ready with a view to this? The surgeon stands on the right of the patient as he lies upon the table; a large dish, or catchbasin, should be elevated high enough to allow the flap or apron of a Kelly pad or an improvised pad made of rolled newspapers, or a rolled oilcloth to project and hang into the basin. The instruments are laid out and well separated on a sterilized towel close to the operator's left hand, so that he can rapidly pick up any instrument desired. Half a dozen sponge forceps, armed with sponges the size of a walnut, made from absorbent gauze or cotton, should be included among the instruments. Of course the usual care regarding cleanliness and asepses should be observed, and we might add, as it is necessary to roll the patient onto the side from time to time, it is better not to merely cover with a protective sheet, but to roll the same tightly around the body, so as to confine the arms and legs. The nurse should be prepared to sponge the interior of the throat when required to do so; she should also have a quart jug of very cold water, iced if possible, with which to douche the face and neck. This acts reflexly, contracting the vessels and lessening the hemorrhage as well as stimulating the patient. After the operation the patient is best kept face downwards so that the blood will flow out of the mouth instead of back into the pharynx, where it invariably finds its way to the stomach. The nurse should remember that considerable hemorrhage can go on without any external evidence, if the patient is allowed to lie upon the back. Prolonged spitting of bright red blood should be reported as well as repeated vomitting of bright red blood material, for this means that there is a vessel which is still oozing.

In cases of post-operative bleeding following tonsillectomy, the attending nurse should notify the surgeon as soon as possible; on her own responsibility she can apply a cracked ice compress about the throat, she might even inspect the interior of the throat and should see the side from which the blood is oozing. It is an easy matter for her to insert into the tonsil cavity, with her fingers or a sponge forceps, pad of cotton or gauze, dry, or soaked in adrenalin, and to hold it there tightly, using counter pressure on the outside with the other hand if possible, until the arrival of the surgeon. Five or six days following the

excision of the tonsils a white membrane covers the denuded surface.

No spraying of the throat should be done unless ordered by the attending surgeon, as it may induce bleeding; nor should anything but cold liquids or soft foods (ice water, iced milk, ice cream, cold jellies, etc.,) be given for the first twenty-four or forty-eight hours.

Should there be a foetid odor to the breath with the formation of excessive quantities of mucus in the throat an antiseptic spray such a Dobell's solution or irrigations with solutions of soda borax and salt may be necessary.

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## BIOGRAPHICAL SKETCH OF FLORENCE NIGHTINGALE

To write of one who has but recently passed away, whose living presence is, so to speak, still hovering over us, is no easy task.

In writing her life, we shall try and bring before use the lesson she has taught, that there is work to our hand if we will but see it, work of the very highest order, the caring for that "temple of the living God," the human body, which Christ took upon Himself and thereby sanctified and honored, or as someone has said,

"Cherish your body, for God made it great,
It holds a guest of might and high estate,
Keep the shrine holy, handsome, high and whole,
For in it lives God's guest—a kingly soul."

At her country's call she left her beautiful home to succor and to help—as only she could do—the brave men who were dying for that country—hers and theirs. Her work done, she went home again. Since then her voice has been heard, her spirit has been felt, and will continue to be felt amongst us from generation to generation.

Florence Nightingale was born in Florence, Italy, in 1820. From her earliest years her strong love of nature and animals manifested itself. Her games too were characteristic, for her great delight was to nurse and bandage her dolls. Her first living patient was a shepherd's dog. From tending animals she passed to human beings, and wherever there was sorrow or suffering, she was sure to be found. Her most ardent desire was to use her talents for the benefit of humanity.

She had a natural shrinking from society; and though her social position necessitated her appearance at Court, her first season was spent in examining into the working of hospitals, reformatories and other charitable institutions. This was followed by a tour of inspection of foreign hospitals. At that time England was sadly behind in matters of nursing and sanitation, and Miss Nightingale, who desired to obtain the best teaching for herself, went through a course of training in the Institute of Protestant Deaconesses at Kaiserwerth. She remained

there six months, learning every detail of hospital management with a thoroughness rarely equalled. She neglected nothing that could make her proficient in her self-chosen task. From Kaiserwerth she went to Paris, where she studied the system of nursing and management in the hospitals under the charge of the Sisters of St. Vincent-de-Paul. After her return to England she devoted herself to reorganizing the Governesses' Sanitorium in Harley street (now the Home for gentle-women during temporary illness), which was at that time badly managed and in great need of funds. Miss Nightingale grudged neither time nor money to this work, and she had the satisfaction of placing it on a satisfactory basis.

To fully appreciate the strength of mind and the determination necessary for a young and accomplished woman like Miss Nightingale to pursue such a carrer, it must be remembered that it was a path yet untrodden, one for which, in England at least, little or no sympathy was felt: that to attain her end she had to break through prejudice, both social and religious. She may truly be ranked among the reformers of the Nineteenth Century, and like all reformers, she had to bear with misinterpretation, with the sneer of ignorance.

It was a long time before even the medical profession, as a body, regarded her with favor. But after physicians had once begun to realize that with trained nursing it was possible to have their orders intelligently carried out, that the percentage of deaths decreased and of recoveries increased; they finally accorded to the trained nurse her professional recognition. That a lady could move out of her own immediate circle and was destined for anything more serious in life than to grace a drawing-room, was an innovation to many.

The principle of the nobility of woman's work was in its infancy, and a certain slur rested upon those who, either from necessity or from any personal motive, enrolled themselves among the workers. Miss Nightingale chose to ignore this feeling, and went her way quietly and earnestly, as one who has an object to attain—an object in her own estimation so high, so noble, that no counter opinion could affect her.

To her the words of the poet might well be applied:—

"A being breathing thoughtful breath,
A traveller betwixt life and death;
The reason firm, the temperate will,
Endurance, foresight, strength and skill;
A perfect woman, nobly planned,
To warn, to comfort and command;
And yet a spirit still and bright,
With something of an angel light."

For forty years England had been at rest. It was in the midst of a peace such as this that war was declared between England, France and Russia.

Florence Nightingale could have had no foreshadowing of the future or of the task which lay before her, and yet she neglected nothing to perfect herself in the line of work she had mapped out.

For forty years England's sword had been sheathed, and though there was nothing to lead one to suppose that her soldiers would be called upon to draw it forth, and even if war broke out, Miss Nightingale could not for one moment surmise that she of all others, a weak woman, would be called upon to play a conspicuous part in it—yet such was the case, a great war was looming over Europe, and she, unknowingly, was preparing herself for her post.

From the war came reports of neglect and suffering among the soldiers which was followed by an appeal which touched all men: "Are there no devoted women amongst us, able and willing to go forth to minister to the sick and suffering soldiers in the East, in the hospitals of Scutari?

"Are none of the daughters of England at this extreme hour of need ready for such a work of mercy?"

Such a call as this could not long remain unanswered. Other appeals followed. An enthusiastic desire to answer the appeal was felt throughout England. There was a fear lest a noble impulse should fail for the want of a head, a hand and a heart to direct it.

But there was one who, in the quiet seclusion of her beautiful home, heard and pondered over these things. She knew her own power and understood now, perhaps for the first time, the end and object of all those years of patient training. She thought of her countrymen dying far away, with none to help. It was not in her nature to hesitate; those who loved her best offered no opposition, recognizing her mission as one of "God's ministering angels on earth." She wrote to Mr. Sidney Herbert, then Minister of War, offering her services as nurse to the army in the East. Almost at the same time he had written her, their letters crossing on the way, requesting her to supervise and organize the whole nursing situation.

From morning till late at night Miss Nightingale labored to organize her staff of nurses. On Oct. 21st, 1854, she, in company with her thirty-eight nurses, set out for Scutari. On Nov. 5th, they entered the Bosphorous and reached Scutari on the same day as the battle of Inkerman was fought, and very welcome they were. They came none too soon as, the day after, six hundred wounded were brought in from Inkerman. Even the surgeons could but confess that Miss Nightingale was the right woman in the right place. Her nerve, her quiet systematic way of going to work, and organizing everything necessary

for the care of the sick and wounded, inspired even the most prejudiced with confidence. They now had someone on whom to depend, and would henceforth be spared the sight of men sinking for want of proper nursing, and because food was not administered often enough.

With the nurses, all that was needed was supplied. One poor fellow burst in tears, exclaiming, "I can't help it, I can't indeed, when I see them. Only think of English women coming out here to nurse us—it is so homelike and comfortable."

Florence Nightingale went very quietly about her work with such tact that she overcame, little by little, the predjudices of those who were most opposed to her. Her first act was to establish a kitchen where everything required in a sick room was prepared quickly. Sir Robert Peel's fund for the sick and wounded provided sago, arrowroot, wine, etc. When not engaged in nursing, the nurses were employed in arranging mattresses, making stump-pillows for amputation cases, and every imaginable comfort was procured from the Nightingale quarters. Nothing which could in any way help to smooth the sufferer's pillow, or aid the convalescent, was omitted by this wonderful woman, whose power of feeling was so great. From early morning till late at night Miss Nightingale moved noiselessly hither and thither; the work she did was stupendous. But she walked steadily on from day to day, doing her work "as unto the Lord and not unto man." In less than two months her name was a household word. "She would speak to one," said one poor fellow writing home, "and nod and smile to many more, but she could not do it to all, we lay there by the hundreds, but we could kiss her shadow as it fell, and lay our heads upon the pillow again, content."

Well might she be called "the lady with the lamp." It is said that when all the medical officers had retired for the night, and silence and darkness had settled down upon all those miles of prostrate sick, she might be observed alone, with a little lamp in her hand, making her solitary rounds.

It is to Florence Nightingale that we owe the change which has made the bed of sickness and the chamber of death no longer a place of horror and fear, but a quiet haven, soothing to body and mind, healing both perhaps, or else, if the earthly temple be shattered, helping the spirit overcome that natural fear of the unknown, and so pass in humble faith through the portals of death into life immortal.

To the very last, Florence Nightingale remained at her post. At last the much longed for peace dawned over Europe.

England accorded Miss Nightingale a hearty welcome on her return. Congratulations poured in from every quarter. The whole nation, from the Queen to the humblest of her subjects, desired to express the deep gratitude, love and respect they felt towards her,

and presented her with a St. George's Cross in ruby-red enamel on a white field, representing England. This is encircled by a black band, typifying the office of charity, on which is inscribed a golden legend: "Blessed are the merciful." On the back of the Royal jewel is an inscription written on a golden tablet by Her Majesty, recording it to be a gift and testimonial in memory of services rendered her brave army by Miss Nightingale.

Even before she left her post, the nation was busy with the thought of how it could acknowledge, in a manner acceptable to her, the heroic work she had accomplished. Thus it came to pass that £50,000 were given her to found a Home which should forever bear her name, and where other women should learn to tend the sick, wisely and well, as she had done.

A Training School for Nurses was the outpouring of a nation's gratitude. A home from whence all that was good and pure should emanate; from whence women should go forth, carrying with them the lamp of knowledge and power, as well as love, to lighten the dark places of the earth, even as she, their founder, had carried the lamp through the dark wards of Scutari Hospital.

Space forbids one to speak of the comforts and furnishings of the "Nightingale Home." Suffice it to say that year after year women go forth out of this home, well taught, loving their work, not feeling it a hardship, smiling at the idea of self-sacrifice.

For many years Miss Nightingale looked forth from her retirement upon a world which she has helped to make more tender, more Christ-like. She stands forth, and ever will stand forth, the pattern of a noble, gracious woman, full of pity and tenderness, as all good women are. So she has passed away, but not out of the memory of man, for her work remains indelible, and daily, nay hourly, from sick and dying beds, grateful patients with thankful hearts arise and call her blessed.

And when the summons came from the Dome of St. Paul, calling the citizens of London to join in prayer, praise and thanksgiving to God, who had sent such a woman into the world, a great multitude answered to the call.

Nurses—her children—climbed the steps of the great cathedral, soldiers and civilians, old and young, all bent on doing honor to her who had just passed out of their midst, and yet was still amongst them.

" 'Tis good that thy name springs from two of earth's fairest things,
A stately city and a sweet-voiced bird.
'Tis well that in all homes where thy kind story comes,
And brave eyes fill, that pleasant sounds be heard;
Oh, voice! in night of fear, like night birds sweet to hear,
Oh strong heart! set like city on a hill,
Ah, watcher! worn and pale, dear Florence Nightingale,
We give thee thanks for thy good work and will."

—A. E. Moyer.

## SCHOOL NURSING IN REGINA

By Jean Browne

I have been asked to outline the system in use in Regina. All the children in the public schools are given a routine examination twice a year, one each term, oftener in special cases. The pupils are examined particularly for defective eyesight, defective hearing, enlarged tonsils and adenoids, carious teeth, pediculosis, for symptoms of tuberculosis, lateral curvature, goitre and chorea. If any such defect is found to exist, a formal notification is sent to the parents, requesting them to take the child to the family physician. Inquiries are made regarding the general health of pupils and such suggestions made as seem most needful in each case, particular stress being laid on the value of personal cleanliness, fresh air, daily evacuation of the bowels, and the care of the teeth. I believe in every case a personal talk on such subjects accomplishes much more than a class-room knowledge.

In order to accomplish the aim in view the nurse must form the connecting link between the school and home. Each week, each school prepares a visiting list for the school nurse. On this are placed the names of pupils whom the teachers suspect to be absent through illness. This arrangement, however, is flexible, and cases of illness may be reported by telephone at any time during the week. In this way, cases of contagious diseases are detected and reported to the City Health Department. A list of the pupils absent on account of contageous diseases is posted in the office of each school, and the teachers are instructed not to admit to their class rooms any pupil whose name appears on this list. In other cases of illness, suggestions and help in treatment from the school nurse is often very acceptable to mothers. It may seem incredible, and yet it is a fact many times proven, that some mothers do not know how to make a simple mustard plaster. Sometimes during these visits to poor homes, children are found in urgent need of medical attention. For instance, last fall one child was found with typhoid fever, in the delirious stage, with an extremely high temperature; the Medical Health Officer was notified, and within a few hours the child was removed to the hospital. Visits to the homes seem to be of the highest importance in cases of tuberculosis. In almost all the cases of incipient tuberculosis we have had in the schools in Regina, it has been found on visiting the homes that the children have not had fresh air in their rooms, nor have they had specially nourishing food. Without one exception these cases have shown marked improvement after the sanitary condition of their homes has been improved. In this connection mention should be made of the good offices of Dr. Hart, Medical Director of the Anti-

Tuberculosis League in Saskatchewan. Dr. Hart volunteered to examine all cases of suspected tuberculosis where the family was poor and had not engaged a family physician, and many children have already been benefited by this generous offer.

In some sections of the city, the dressings done by the nurse form an important feature of the work. These are mainly wounds, impetigo, scabies, burns and discharging ears. At times, there have been as many as 22 daily dressings in one school.

In cases of accidents, the school nurse is telephoned for at once. If the accident be a serious one, the child's family physician is called in, and if not, the nurse looks after the case herself.

The work of school inspection was begun in Regina, Feb. 1st, 1911. At the end of that school year forty children were fitted with glasses. These were mostly the children of well-to-do parents, but there still remained a great many poor children whose parents could not afford treatment. However, in April, 1912, the Out-Door Clinic at the General Hospital was opened, and then all these children received the necessary treatment, except a very few cases whose parents were prejudiced against sending their children to the hospital. In 1912 thirty children were fitted with glasses. In almost all of these cases the teachers noticed the marked improvement in the child's progress in school after being fitted with glasses. Notes were made on these by the teachers. I shall quote a few characteristic cases.

John Miller; aged 12, German; in special class for sub-normal pupils; case of myopia and astigmation. Treated at the Out-Door Clinic. Before treatment, took no interest in school work, was sullen and ugly, and could not be roused to make any effort in his class work. Parents refused to have the child's eyes attended to, after receiving a notification from the nurse. Finally, his eyes were tested in the Out-Door Clinic and he was fitted with glasses. Since then he has shown marked improvement in read and writing, and still more so in conduct. He now takes considerable interest in all his school work.

Milly George; 13 years; Servian; attending Earl Grey School; Miss Anderson's room. Before treatment could never see work on the blackboard; hesitated and stumbled over words in reading from a book; complained frequently of headache. Her eyes were tested in the Out-Door Clinic and glasses were supplied by the School Board. Within six weeks after this, she became the best reader in the class; has had no trouble in reading, either from a book or the blackboard, and consequently she has made improvement in all her work.

This little girl came into my office about a month after she got her glasses, and when asked if she were getting on any better at school, she replied, her face brightening up as she spoke, "Oh yes; many times mucher. Miss Anderson says I read lovely now."

Tena Saboda; age 11; Roumanian; Miss Milligan's room. Before treatment writing and dictation poor, couldn't read anything on the blackboard from front seat; frequent headaches, anaemic; cried frequently if exercises weren't right. Had her eyes tested at the Out-Door Clinic and was fitted with glasses. Quite soon afterwards her general health improved. Cheeks became rosy, and she is increasing in weight. She now wears a happy expression, holds herself erect, never cries in school. All her school work has very much improved.

Another pupil in this room had a very bad corneal ulcer, but was taken at once to the Out-Door Clinic for treatment, and was able to attend school again in less than a month.

In 1911 there were 41 operations for tonsils and adenoids, during 1912, 53. There have been probably more notes handed in on these cases by teachers than on any others. Permit me to quote some of these:—

Cyril Drake; age eight; grade 1, Albert School; Miss Stevens. Before his operation he breathed through his mouth, had great difficulty in sounding letters and in reading; would not make the slightest attempt to sing; very dull in his class work; memory poor. After operation he breathes through his nose. He shows marked improvement in phonics and reading; can now read connectedly; attempts single notes in singing. He is much brighter, and memory is much improved.

Fred Griston; age 12; in Miss Kerr's Special Class for sub-normal pupils in Victoria School. Diseased tonsils and adenoids, and frequent skin eruptions. This boy was of an extraordinarily sulky disposition, with no inclination to work. In May, 1912, he was operated on for tonsils and adenoids at the Out-Door Clinic. For several months after this he received medical attention. No improvement in his work was noticed until the following September, when he began to take a decided interest in all the subjects. He has had no skin eruptions for two months, and is now developing quite a cheerful disposition.

Eva White; ten years; German; Grade I; adenoids. Before operation, was stupid and slow in her class work. Frequently cried in school. Very irregular in attendance, often sick. After her operation, she showed rapid improvement and became regular in her attendance. She is now in Grade 2 and seldom misses a day.

Although, in 1911, 111 school children were put under a dentist's care, and, in 1912, 100 were treated for dental caries, still the notifications sent to the parents in regard to treatment for their children's teeth are more neglected than any of the others. Unfortunately, up until the present time, there has been no provision made for free dental treatment. However, in March of this year the School Board approached the Dental Association of this city for the purpose of establishing

a free dental clinic, and the dentists generously promised to treat a limited number of poor cases every Saturday forenoon. The chair is now installed in the School Nurse's Office in Alexandra School, and the work has begun. There have been so many cases observed of poor health in school children primarily due to carious teeth. One particular case, for example, of this was Aldred Pearson, aged 9, in the Albert School. His mother, who was in very poor circumstances, came to the office one day to tell me about her little boy. She said he fainted almost every morning, had no appetite, was getting thin, and was nauseated almost daily. On looking through the file for his history card, it was found that a notification had been sent home about his teeth, about two months previously, and, indeed, they were in a terrible condition. When told it was probably his teeth that were causing the other symptoms, she replied that she couldn't afford dental treatment. However, one of the dentists very kindly treated him gratuitously, and in a short time all these symptoms disappeared.

Beginning this term "Little Mother Classes" are being organized in Earl Grey School, where the pupils are of many different nationalities—Servian, Roumanian, Russian, and German predominating. In many of these homes, the care of the babies in the homes is left to the older sisters. In these classes, the school girls are taught how to bath, and properly clothe a baby, how to make its bed, and how to make its food. They are also taught how to make mustard plasters, nourishing fluids, for the sick, and how to dress simple wounds and burns. They are taught the value of fresh air, plenty of good water for drinking purposes, personal cleanliness, the care of the teeth, and the necessity for regular movement of the bowels.

This work in Regina has been made possible through the splendid co-operation of the teachers. The active interest they have taken in this work has far exceeded all anticipations at its beginning. Since the family physician is really the medical inspector, in the Regina system it can easily be seen that an adverse attitude on his part would have frustrated the work in its incipiency, but fortunately the "family physician" in almost every instance has generously stood by it. In regard to the work in contagious diseases, Dr. Bow, the Medical Health Officer, has given every possible assistance even in the busiest seasons.

To sum up the case for the school nurse, she is the teacher of the parents and pupils in applied practical hygiene. Her work prevents loss of time on the part of the pupils and reduces the number of exclusions for contagious disease. She treats minor ailments in the school, and furnishes aid in emergencies. She gives practical demonstrations, in the home, of required treatments, often discovering there the source of the trouble. Finally, the school nurse is the link between school and home.

## THE GROUCHES OF A GRAD—SADIE AND SOME OLYMPIANS

By Rene Norcross, Victoria, B.C.

(*Continued from November issue*).

"Oh, alright, we'll count that Persephone one out," Sadie interrupted, tartly; "but it's no use turning them all down. I've got to go as something or else stay at home. There was one I saw somewhere that I can't remember the name of—began with a P—oh I know, Perseus."

"Perseus happened to be a god, dear," I murmured; "very thoughtless of him, but it can't be helped now."

"I know," Sadie retorted with some triumph. "I didn't want him; I was only trying to get at that goddess he was mixed up with."

"Oh, dear me, you mustn't talk like that," I remonstrated hastily. "People should be careful what they say. Andromeda was one of the most respectable goddesses of them all; a very well brought up girl, and Perseus was pretty lucky to pick her out."

"You do talk a fearful lot of rubbish," Sadie exclaimed snappishly, "but I'd forgotten those old goggles. I suppose this Andromeda didn't wear the mortar-board?"

"Well no, she didn't," I admitted reluctantly. "I'm afraid she's out of the question for your purpose, Sadie. But it wasn't her fault, poor dear, and there's every reason to believe they lived very happily ever after."

"Oh, if only I'd been at that committee meeting," Sadie burst out wrathfully.

"It's a funny thing," I mused. "A week ago you said you would not go to the dance at all this year, and now you are crazy to go."

I paused expectantly, but Sadie only wrenched at her clean laundry bundle, and made no effort to assuage my curiosity.

"And if you can't recollect that girl for me I'll have to go as a plain nurse," she gloomed.

"Not at all." I said primly, "I am told that between the becomingness of the uniform and the healthiness of the life, there is no such creature as a plain—"

"Oh, for goodness' sake go, and let me get into my street things," Sadie raged, in the last pitch of exasperation. "And don't strain your intellect trying to think up any more costumes for me. I'll ask the janitor's wife for a few suggestions as I go downstairs."

I allowed myself to get as far as the door before I relented.

"I wonder," I mused, my hand on the knob, "if you could possibly have been meaning Tennyson's sweet girl graduate, in the Princess?"

"That's it." Sadie spun round from the mirror, knocking my photograph onto the floor with her elbow. "That's what I had in my mind all the time, "Sweet girl graduate jangled out of tune and harsh," but that doesn't matter if only I can get the costume."

"It wasn't the sweet girl that was jangled in any case, dear," I reassured her, "and as for the costume, that's simple. Davy's a B.A. Get her on the 'phone and ask her to lend you her outfit."

Davy, otherwise Miss Davis of the Metropolitan staff, would be charmed to lend Sadie her academic robe; it would need pressing, and the moths might have got into it, but—

"But I told her I'd chance that," said Sadie, coming back radiant from the 'phone; "you see, it's a bet."

"Ah!" I said, and sat down again.

"Yes," said Sadie, very busy with her hair, "I met Leila Marsh on the car coming up, and she says the new House man is the nicest looking boy she ever saw, and most of the girls are crazy about him, but he's proof—simply doesn't know they're there, nice manner and all that you know, but nobody's ever seen him look twice at the prettiest of them. I said somebody ought to wake him up, and Leila offered to bet me that Russian leather hand-bag in Doyle & Doyle's window—you've seen it—that I couldn't draw him into a flirtation at the dance."

"If I had known that that was your outrageous reason for changing your mind," I began virtuously, "you would have got no help from me."

"That's what I thought," said Sadie, unabashed; "but there's no sense in letting the men get too conceited. Run along like a brick and heat me up some of that jolly stew, and I'll lend you the hand-bag sometimes."

"Well?" I queried, when Sadie let herself into the flat at 3 a.m. the morning after the ball. I do not dance, and in any case I was expecting a call at any minute; but curiosity had kept me awake.

"Oh, it wasn't bad," said Sadie, yawning. "The room was rather too hot and I've heard better music, but the cosy corners were alright, and the supper—"

"Who did you sit out with?" I inquired, refusing to be lured away.

"Oh, different ones. There were a lot of the staff men there and all the internes, of course; most of the costumes were very good—"

"Was Dr. Morris there?" I asked, pointedly. Dr. Morris was the new and invincible House man.

"Why, of course. Not much of a dancer, though. Now that was a dollar-fifty pair of stockings and only the second time on, and just look at that heel. I call it simply—"

"Oh, just as you please," I said stiffly. "You are not bound to tell me, of course. You might put the light out as soon as possible; I

want to sleep."

"Alright, I was going to tell you in a minute—you needn't get so waxy," said Sadie, resignedly. "I don't get the hand-bag."

"What?" I sat up and stared. I had not approved of Sadie's intention, but I had never expected her to fail in it.

"You're certainly complimentary," she said. "The fact is—I can say it to you because you'll believe me, but the others wouldn't—I didn't try to flirt with him—not after the very first."

"Sadie?"

"No I didn't. There's another girl."

"That hasn't always—"

"No, I know it hasn't, but those were different. They were on the spot, anyway, and could put up a fight, but this girl is back in Bruce County, where he comes from, and she's the homeliest little—I never saw a plainer girl—he showed me her photo; carries it around all the time—and dressed in a blouse I wouldn't wear to weed the garden in. And he gave me the whole story. Oh, if I told Leila I'd won the bag she'd give it me in a minute, for it must have looked like furious flirting. We sat out three dances running; said he'd never met anybody so sympathetic and congenial since he'd come West. I did feel cheap, but I tried to make up by admiring the photo. Her father is the wealthiest man in those parts, but such a tight-wad, and the poor boy has to make good before he can say a word. Tight-wad wouldn't listen to an engagement, so he came West as soon as he graduated to make money quicker, and she'll keep on helping Mamma with the chores and getting a new dress—marked down—once in three years till he gets back and carries her off. And he could no more tell you the color of my hair right now, or what I wore—and the blessed boy hasn't a notion that half the girls in the room were making eyes at him. Apart from the hospital he's only got one idea in his head—that that snub-nosed little dowd back in Sag Corners will get tired waiting for him and marry someone else. Isn't it pathetic? Isn't it simply criminal?"

"If all the handsome men married only pretty girls, and all the plain men married homely girls," I remarked, sententiously, "the human race—"

"Yes, of course; I'm through with the light now—good night," said Sadie hastily, and switched off the current.

## HOSPITALS AND NURSES.

The Edmonton Association of Graduate Nurses wishes to warn all nurses against coming to Edmonton, as the number of nurses here exceeds the demand.

A general meeting of the Graduate Nurses' Association of British Columbia was held on Saturday, Oct. 11th, 8 p.m., at the Alexandra Club, Victoria, B.C.

The meeting was called to order by the president, Miss Wright, of New Westminster. After the roll call, and the minutes of the last meeting had been read by the secretary, the president spoke a few words on the Registration Bill for Nurses, which had been presented at the last Session and had been laid over until the next. She said that the fact of the Bill being printed for the members of the House might be taken as a good sign, and would encourage us all to do what we could in working for it this year. There were several alterations that had been made since the Bill was first compiled, viz., the first council is to be appointed by the B. C. College of Physicians and Surgeons; the amount of the fee for registration, after open discussion at the annual meeting, was reduced to $10.00; and the word "attendant," referring to the registration of non-graduates if they wish it, to be altered to "household nurse."

There was a discussion on what the local nurses' associations could do towards helping, and suggestions were made that condensed literature bringing forward the most important points of the Bill be printed for distribution among the associations. Miss Randall, of Vancouver, gave a report of the special committee, who are working along these lines.

The resignation of the second vice-president, Miss Patton, of Kamloops, was then read. It was proposed by Miss Norcross, of Victoria, and seconded by Miss Scott, of New Westminster, that the office be kept open until a new superintendent was appointed at the hospital, in order that Kamloops might be still represented among the officers of the association.

The meeting then adjourned and tea and coffee were served by the Victoria Nurses' Club to the members and guests.

Among those present were: Miss Randall, Miss Hall, Miss Trew, Miss Breeze, Miss R. Judge, from Vancouver; Miss Wright, Miss Scott, Miss Gray, from New Westminster; Miss Morrison, Miss Hurst, Miss Jones, Miss Norcross, Miss Tombley, Miss McCrae, Miss Kennedy, Miss Swan, Mrs. Greig, Miss Coward, Miss Archibald, and many others from Victoria.

Miss Alice S. Stark, graduate of Guelph General Hospital, left on

October 22nd to resume her work in New Westminster, B.C., after spending a pleasant three months' holiday at her home in Starkville, Ontario.

While in the East Miss Stark completed a Post-Graduate Course in School Nursing at Toronto, receiving her diploma.

Miss Anna Twiddy, Moose Jaw General Hospital, 1913, has accepted a position in the hospital, Swift Current, Sask.

Miss Florence J. Potts, who has been such an able assistant superintendent at the Sick Children's Hospital for some years, has accepted the position of Lady Superintendent. Our best wishes go with Miss Potts in her new duties. The hospital is fortunate in having such a splendid woman at its head.

Mr. John Ross Robertson has again showed his generosity by presenting to the Nurses' Club, 295 Sherbourne St., a number of beautiful pictures The club is a delightful spot to rest or entertain in, and is most artistic in its appointments. The nurses who have not become members are missing a rare treat in not availing themselves of its many advantages.

Miss Panton will be much missed on the school nursing staff, having recently given up to take charge of the preliminary training of nurses at the Hospital for Sick Children.

The first meeting of the season of the Alumnae Association, Hospital for Sick Children, Toronto, was held at the Nurses Residence, Elizabeth Street, on Thursday, October 9th, 1913. Miss Teeter, the newly-appointed president, was in the chair. Usual routine business was disposed of, and plans for work for the ensuing year were discussed. Miss Grace A. Gowans was appointed recording secretary, pro tem, during Miss Hill's leave of absence.

A tea was given at the Graduate Nurses' Club by the classmates of Miss Jennie Smith, whose marriage takes place shortly. Mrs. Harold Peletier and Mrs. Bodington presided at the prettily decorated tea table. With the good wishes of her friends Miss Smith received a beautiful case of spoons.

The Board of Health Nurses entertained the Aluminæ Association of the Toronto General Hospital in honor of Miss Scadding, who leaves shortly for New Westminster, B.C., where she will fill the position of night supervisor in the New Hospital. The Alumnae, of which a large number were present, presented Miss Scadding with a beautiful sheaf of roses.

Miss Mary Hill gave a little farewell tea to her friends at the Club before leaving for Boston, where she intends spending the winter. She was assisted by Miss Walsh and Mrs. Canniff.

The nurses are busy preparing for the Bazaar which takes place on the 26th of November at the Toronto Nurses' Club, 295 Sherbourne Street.

Miss Nancie T. Cameron, Albany Hospital, '98, has returned to her home, Kent, England, after paying a flying visit to Western Canada. Miss Cameron is a granddaughter of Sir Charles Tupper. Her time and talents are devoted to worthy causes.

Miss Hallie Rose, T.W.H., '09, who has been doing private nursing in Detroit, Mich., for the past three years, has returned to Toronto to nurse.

On Oct. 13th St. Michael's Hospital Alumnae held their first meeting of the season at the hospital, when the election of officers took place. A large number of the new graduates were present and became members. Some new plans were made for the winter and great enthusiasm shown. A committee was formed to take charge of a children's wardrobe for the poor. A hearty vote of thanks was tendered the retiring officers. Dainty refreshments were served by the senior nurses of the school, and pleasant reminiscences recalled. The names of the newly-elected officers will be found on the usual page.

The annual retreat for nurses was held at St. Michael's Hospital, 29th ult. The exercises were conducted by Rev. Father Bennett, C.S.S.R. A large number of the graduates attended, to whom a cordial invitation was extended. At the close Solemn High Mass was celebrated for the deceased members of the Alumnae Association.

The St. Michael's Hospital Alumnae Association had the Holy Sacrifice of the Mass offered at St. Michael's Hospital for Miss Helen Foley, one of their members lately deceased. Many of the graduates and the entire school of nurses were present.

Miss Maude McLachlan, St. Michael's Hospital graduate, who has been in Vancouver for the past two years, has returned to private nursing in the city.

Miss Shanahan, St. M. H. graduate, has gone to Penetang.

Miss Delia Provencher, St. M. H. graduate, has gone to Louisville, Ken., to join Miss Kehoe, a class-mate, who has been very successful in the profession.

The monthly meeting of the M.G.H.A.A. was held at the Nurses' Home, Friday, Oct. 10th, 1913. Miss Dunlop occupied the chair in the president's absence. The minutes of the last meeting were read and adopted.

Business of the association was discussed and the lectures for the ensuing year were arranged for. The meeting was then adjourned and tea was served.

Miss Louise McLeod, graduate M.G.H., class '07, is leaving this

month for Chemanus, B.C., to take charge of a hospital there.

Miss K. E. Smith, graduate M.G.H., class '11, who was operated upon for appendicitis three weeks ago, is progressing favorably.

Miss Jean Wilson, graduate M.G.H., class '08, has returned from an enjoyable vacation trip to Toronto and other Western cities.

Miss Muriel Smith, graduate M.G.H., class '11, has returned from St. Agathe, and is doing private nursing.

Miss Winnifred Caldwell has returned from a holiday trip to her home in Arnprior, Ontario.

The monthly meeting of the Peterboro branch of the Graduate Nurses' Association of Ontario, was held in the Public Library, October 1st, at 3.30 p.m. There were fourteen members present and there are twenty-six names on the roll. After the minutes of the meeting were read, Miss Shaver gave a very interesting paper. Miss Dixon and Miss Mowry have worked hard to make the association a success. Miss Mowry is chairman, Miss Howson secretary and treasurer.

The annual meeting of the Nicholl's Hospital Alumnae was held on Friday, October 8th, at "Coleman's." The following officers were elected:

President: Miss Ferguson.
1st Vice-President: Miss Dixon.
2nd Vice-President: Miss Rosamond.
Treasurer: Miss Wood.
Secretary: Miss Mowry.

Miss Brown was appointed local representative of "The Canadian Nurse."

Following the meeting the graduates of the Nicholl's Hospital entertained the recent graduates, Miss Rosamond, Miss Crowe, Miss Wood and Miss Walsh.

Miss Steele, graduate of the Nicholl's Hospital, who has been visiting friends in the city, has returned to Memphis, Tenn., U.S., where she has been nursing for the past two years.

Miss J. Sutherland, who has been a prominent worker in nursing circles in New Zealand, and who recently was entertained at the Toronto Nurses' Club, has announced her marriage to Mr. James Dunnett, M.P., of Ottawa. We are glad to welcome Mrs. Dunnett to our shores.

The cornerstone of the new St. Justine Hospital, Montreal, has been laid.

Miss Gilmour, graduate of the Royal Victoria Hospital, Montreal, and at one time assistant superintendent of that institution, has gone to Edmonton, Alta., to take the position of superintendent of the Alexandra Hospital there, rendered vacant by the marriage of Miss Fair-

service, which took place on the 26th of June to Mr. Cecil Ewart. Miss Gilmour has been traveling in Europe during the past summer.

Miss Cora Archibaldt, class '09, R.V.H., Montreal, has accepted a position as Dietitian in the Vancouver General Hospital, and took up her duties there on October 1st.

Sister M. G. Williams, A.M.C., has leave of absence for three months, ending January 1st, 1914.

Miss Marriott, graduate of the Mack Training School for Nurses, St. Catharines, Ont., recently underwent a serious operation. We are glad to report that she is making a good recovery.

Miss Sutherland, graduate of G. & M. Hospital, Collingwood, Ont., Head Nurse G. & M. Hospital, St. Catharines, has returned after a pleasant vacation

The regular monthly meeting of the Victoria Nurses' Club was held on the first Monday of November, Miss E. H. Jones, president, in the chair.

Mrs. A. M. Gregg had invited the club to her cosy rooms, a goodly number enjoying her hospitality. The minutes were read and adopted. Four new names were added to our roll call. A letter of resignation from Miss Norcross was read. Much regret was expressed that she should withdraw. Miss Turner and Miss Alexander are both ill. We hope that they will soon be strong and well.

Business being disposed of, a most enjoyable tea was served. A hearty vote of thanks was given Mrs. Gregg, and good-byes said, thus bringing a very pleasant afternoon to a close.

Miss Marie Newmeyer, of the Jubilee Hospital, Vernon, B.C., 1912, has been appointed lady superintendent of the Hospital Golden, B.C., and Miss Thomas, of the Kootenay Lake Hospital, Nelson, class 1913, has been appointed head nurse.

Miss Jones, graduate of the Jubilee Hospital, Vernon, B.C., class 1911, and recently on the staff of the Moose Jaw General Hospital, is now on the staff of the General Hospital, Medicine Hat, Alta.

Miss I. Blythe (V.G.H.) has accepted a position in the Good Samaritan Hospital, Los Angeles, California.

Charlotte MacKenzie (T.G.H., 1910) passed away on Nov. 2nd, at Kamloops, B.C., after a long and trying illness of over two years.

## VICTORIA HOSPITAL ALUMNAE ASSO., LONDON, ONT.

The first meeting of the season of 1913-1914 of the Victoria Hospital Alumnae Association, London, was held at the hospital on October 15th. Miss Forsyth, of the Social Service Department of New York City, gave a very interesting talk on Social Service work in that city.

Miss Stanley, lady superintendent, entertained at the close those present with refreshments in the spacious and beautiful parlors of the Nurses' Home.

An interesting and instructive program has been prepared for future meetings, which will be held on the first Tuesday of each month till May, inclusive.

The second meeting of the season 1913-1914 was held November 4th in the new Hygienic Building. An interesting address on Visiting Nursing was given by Miss Dyke, Toronto, Superintendent of Board of Health Nurses, in that city, illustrated by instructive lantern views. These views, thrown on the screen, demonstrated very forcibly the great good that is being done in Toronto by the Public Health Departments through their Visiting Nurses.

Miss Jessie Mortimer, late Supervisor of Operating Room at Victoria Hospital, is now Lady Superintendent of the Samaritan Hospital, Ashland, Ohio. The new addition to private wards of Victoria Hospital is beautiful and complete, leaving nothing to be desired.

Miss A. Macfarlane (T.G.H.) is spending the winter at Los Angeles, as night superintendent in the Good Samaritan Hospital there.

Miss B. Edstrom (V.G.H.) has left Vancouver, and has taken a position in the King County Hospital, Georgetown, Wash.

Miss McDougal (V.G.H.) has accepted the post of one of the assistant superintendents of the Good Samaritan Hospital, Los Angeles.

Collingwood.—Miss Morton and Miss Carr were in Toronto to attend the Canadian Hospital Association mteeings, and enjoyed them very much.

Smallpox, we are sorry to say, has broken out in town, so that the schools, churches, library and all places of amusement are closed by the medical health officer.

Miss Burkholder and Miss Shaw are nursing smallpox.

Last Thursday the Graduate Nurses moved to their new home, where they will have plenty of accommodation for a larger number of nurses, which the size of the town seems to require.

Providence Hospital, Haileybury, Ont., was formally opened October 22nd, 1913. The guests were received by the Sister Superior. The building is splendidly equipped, and many expressions of praise were offered on the general appointment.

## ALUMNAE ASSOCIATION OF THE MACK TRAINING SCHOOL FOR NURSES, ST. CATHARINES, ONT.

Meetings: First Wednesday in each month at 3 p.m.

Nurses graduated from all recognized training schools are cordially invited to attend.

President—Miss L. B. Shantz.
First Vice-President—Mrs. J. Parnell.
Second Vice-President—Mrs. R. L. Dunn.
Secretary—Miss M. Albright.
Treasurer—Miss A. E. Moyer.
News Correspondent—Miss M. F. Thomson.

### PROGRAM—1913-1914

September—Social Evening.
October—Biographical Sketch from "The Life of Florence Nightingale." Miss A. E. Moyer.
November—Safeguarding Surgical Operations. Dr. W. J. Chapman.
December—Suggestions for Christmas Among the Sick. Mrs. J. Parnell.
January—Nursing as a Vocation. Miss L. I. Uren.
February—Pneumonia. Dr. D. V. Curry.
March—To What Extent a Nurse's Life Influences Her Patient. Miss McIntosh, Buffalo.
April—Nursing Ethics. Dr. W. T. Greenwood.
May—The Importance of Visiting, Nursing and Social Service Work Miss E. M. Elliott, Port Hope.
June—The International Council of Nurses at Cologne. Miss Snively, Toronto.
July—My Experience as an Army Nurse. Miss V. Rittenhouse, Texas.
August—Annual Meeting.

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The Guelph General Hospital Training School held its graduating exercises on Friday, Oct. 10th. The following young ladies received diplomas: Miss Ethel M. Armstrong, Lowville, Ont.; Miss Margaret B. Stelck, Zurich, Ont.; Miss Mary E. Sunley, Guelph; Miss Mabel M. Orpen, Toronto; Miss Mildred M. Pfaff, Guelph; Miss Estella Kitely, Drayton; Miss Mary T. Watt, Elora; Miss Nellie Mackenzie, Guelph; Miss Alice M. Shaw, Guelph.

Dr. McCullough, Provincial Health Officer, gave the graduates' address.

Dr. Lowry administered the hippocratic oath and presented the diplomas.

Dr. A. MacKinnon presented the badges. After a delightful program of music and speeches a social evening was spent in the Nurses' Home.

Miss Louie McLeod (Montreal Gen. Hosp.) has been appointed Lady Superintendent of the hospital at Chemainus, B.C., and has taken up her duties there.

A survey of Public Health Nursing in Canada would, we believe, reveal work of which the Canadian National Association of Trained Nurses would feel justly proud. At the annual meeting in Berlin, May, 1913, a resolution was passed that a committee should be formed to report upon the advisability of forming a Public Health Nurses' Association in 1914. This committee when complete should be representative of the outstanding types of Public Health Nursing. Local conditions have resulted in the formation of various organizations, so that the value of this committee's report will depend upon a comprehensive knowledge of Canadian nursing conditions.

"Where order in variety we see,
And where, though all things differ, all agree."

Any suggestions for the committee may be addressed to the convener, Miss Eunice H. Dyke, R.N., Department of Health, City Hall, Toronto.

We consider that one of the most important conclusions reached at the recent Congress of School Hygiene, held in Buffalo, was that relating to the value of the Public Health Nurse. It was said in no uncertain terms that the Public Health Nurse is the keystone of the arch of child hygiene; that it is she only who gets closely into touch with the home life of the tenement child. Who can appreciate the needs of the neglected child but the one who, equipped with special training, visits the home day in and day out to observe each need as it arises.

It is indeed gratifying to be told of one's importance in the world, and we hope that by this praise we will be inspired to further endeavor, that we may ultimately give the unfortunate street urchin his fighting chance to grow up into a useful member of society.

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Miss Jean A. Harrison, R.N., Maccan, Nova Scotia, graduate of Whidden Memorial Hospital, Everett, Mass., and post-graduate of Bellevue Hospital, New York, and Alexandra Hospital, Montreal, Canada; also a graduate of the Penna. Orthopaedic Institute and School of Mechano-Therapy, Inc., 1709-1711 Green Street, Phila., has been placed in the charge of the Mechanical Department at the University Hospital and Training School for Nurses, Iowa City, Iowa.

## HOSPITALS

The following course of lectures has been arranged for 1913-1914 for the nurses in training at the Hospital for Sick Children, Toronto, Ont., under the direction of Miss F. J. Potts, Supt. of Hospital and Training School.

### JUNIOR LECTURES

Dr. D. E. Robertson—Bandaging—The manufacture, economy, and indications for bandages, the fundamental figures of bandaging, application of swathes, and the preparation of the ordinary splints. Instruction in the common bandages used for the several regions of the body.

Dr. D. E. Robertson—Orthopedic Surgery—The normal child. Congenital and acquired deformities. Mechanics of the human body. Disease of the spine. Orthopedic appliances. Nursing care. Diseases of the other joints—arthritis.

Dr. Graham—Hygiene and Bacteriology—Personal Hygiene, including food, clothing, bathing, exercise, etc. Hygiene of sick-room, including composition and pollution of air and water. Destruction of bacteria. Disinfectionn and sterilization. Relation of Bacteria to Disease. Immunity, modes of infection and transmission. Ventilation—Dangers of draughts in sick-room. Heating, etc.

Miss Whealey—Materia Medica—Weights and measures and how to calculate percentage. Drugs—their uses; active principles and doses. Pharmaceutical preparations. Making powders, ointments and simple solutions. Poisons and antidotes. Care of stock from an economical standpoint.

URINALYSIS—Anatomy and Physiology of Urinary Organs—Elementary analysis. Tests.

### INTERMEDIATE LECTURES

Dr. McGillivray—Infectious Diseases—Infection, contagion, exanthemata, prophylaxis, immunity, cerebro-spinal meningitis. Amoebic dysentery. Malarial fever. Smallpox, vaccinia, chickenpox. Scarlatina, measles, rubella. Mumps, whooping cough. Acute follicular tonsilitis. Diphtheria.

Dr. Clelland—Gynaecology and Obstetrics—Pelvic anatomy—Inflammatory diseases of pelvis—Causes—Treatment. Preparation for minor operation—After care—Preparation for Abdominal Operation—After care. Nursing in special gynaecological cases. Physiology of pregnancy and labor—Delivery—Management—Nurse's Duties. Postpartum haemorrhage—Puerperium—Puerperal diseases—Dangers to be avoided. Child at birth—Receiving—Washing—Feeding and general care of new-born child.

Dr. Strathy—Medicine—Diseases of the joints—Rheumatic fever; subacute, chronic and muscular rheumatism; arthritis deformans; gout. Haemorrhage diatheses—purpura, haemophilia. Anaemias and leukaemias. Typhoid fever. Diabetes mellitus and diabetes insipidus. Pulmonary tuberculosis—the etiology and prevention. Early symptoms and diagnosis. Treatment and results. Use of tuberculin in diagnosis and treatment. Social factors in its prevention. Acute lobar pneumonia. Influenza. Disease of the thyroid gland, simple goitre, exophthalmic goitre (Grave's Disease), cretinism, myxoedema.

Dr. Gallie—Surgery—The principles of aseptic and antiseptic surgery; wound healing. Wound complications; inflammation; suppuration; abscess; ulcer, sinus, fistula, erysipelas, septicaemia; the termination of infections. Burns and scalds. Fractures, dislocations, wounds, contusions, sprains, injuries to joints, bones and tendons. Tumors; surgical tuberculosis; tetanus; syphilitic lesions; surgical complications in typhoid fever.

Dr. McLennan—Ear, Nose and Throat—Anatomy of the ear—Care in health and disease. Diseases of the nose and throat. Treatment and nursing.

Dr. Maclaren—Eye—The anatomy of the eye—Care in health and disease. Care of the eye after operations.

SENIOR LECTURES

Dr. Allen Baines—Infants and Young Children—Infant feeding—Breast and artificial. Feeding in unusual and difficult cases, and of older children. Gastro-intestinal diseases. Diseases due to faulty nutrition.

Dr. C. L. Starr—Surgery—Abdominal surgery—Preparation and after care of patient. Surgical emergencies.

Dr. C. K. Clarke—Hospital Economics.

Mr. J. Ross Robertson—The History of the Hospital—Special lectures.

Dr. C. S. McVicar—Public Health Nursing—

Lina Rogers Struthers, R.N.—The Nurse in Public Service—

Miss E. Dyke—Social Service Work—

# Editorial

## NURSING IDEALS

With the approach of Christmas comes again the revival of the broad, kindly, humanitarian spirit of the Master. The spirit of unselfishness that makes us think of the happiness of others, and creates anew within us the spirit of good-will to all.

Nurses are particularly in touch with suffering humanity and are called upon to give much of themselves to their patients, and in the giving may create impressions that may be a power for good. A nurse who obtains her highest happiness in the service she renders to sick and frail humanity, must be a follower of the Master. She has a broadminded charity for human frailties; she has a cheerfulness begotten of her high hopes; she is the light of truth, and her vision is from the mountain top of human service.

Her great opportunity is a privilege and not a duty. The sick are particularly impressionable to the high call of honor, truth, virtue and righteousness, and this is the atmosphere of true cheerfulness and happiness. No nurse is true to herself or to the profession, who does not seek the highest ideals of life.

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## PUBLIC HEALTH NURSING

The improper use of the name "Public Health Nurse" has caused much confusion and misunderstanding among nurses not familiar with the different bodies doing public health work. Public health nursing is a broad term which includes all nurses doing public welfare work, whether they belong to a board of health, board of education, hospital social service, settlement, Victorian Order, or other visiting nursing association.

A nurse employed by any one of these bodies may be called a "Public Health Nurse," and it is improper and confusing to use the name to specially designate the board of health visiting nurse.

In this connection we observe that at the meeting of the Canadian National Association of Trained Nurses, at Berlin, it was proposed to form a new organization of nurses, called the Public Health Nurses' Association.

There must of necessity always be a number of local associations dealing with social service work, and these demand a great deal from nurses whose time is limited for such meetings.

The Canadian National Association of Trained Nurses was formed for the purpose of uniting these associations in one meeting at one place.

It would appear to us that to form another association would be undoing the practical object in view, when the Canadian National Association was formed. It is again a question of time and money. Furthermore, every additional association having similar objects in view increases the difficulty of getting even a fair attendance at the meetings of the already existing organizations and decreases the enthusiasm.

If public health nursing can be made a section of the Canadian National Association of Trained Nurses it would avoid another association and another annual meeting.

# The Guild of Saint Barnabas

The Montreal Branch of the Guild held its first meeting since the summer in the Church of St. John the Evangelist, on Tuesday evening, October 21st, when those present included the chaplain, three honorary members, fifteen members and one associate.

The Office was said and the monthly paper of Guild Thanksgivings and Intercessions (which comes enclosed in the magazine) was joined in, the Chaplain first saying a few words as to its helpful use. He suggested using this paper at our monthly meetings and also that each member should use it regularly at some set time, possibly coming to church a little earlier than usual on Sunday and going over it then. He pointed out that behind the list of names and initials, which seem so formal to us, may lie some great need or trouble, and that our prayers may help individual cases, of which we know nothing, while we may also have our own list of intercessions and pray for patients and friends of whose needs we are aware.

A helpful address was given by the Chaplain on "Forgiveness," this subject being taken from the Epistle for the week (St. Matt. 18:21), which had been read as the lesson.

At the close of the service tea was served in the Guild Room, where great pleasure was expressed at having with us Nurse Dawson, one of the four nurses who were admitted into the Guild as associates at the first meeting of the branch. We were also pleased to welcome to the meeting a member, Miss Holleck, who has been transferred to our branch from Cheltenham, England, and another nurse who was admitted as an associate in London, but who resides principally in the United States.

## THE GRADUATE NURSES' ASSOCIATION OF ONTARIO

**(Incorporated 1908)**

President, Miss Bella Crosby, 41 Rose Ave., Toronto; First Vice-President, Mrs. W. S. Tilley, 56 George St., Brantford ; Second Vice-President, Miss G. A. Read, 156 John St., London; Recording Secretary, Miss Ina F. Pringle, 188 Avenue Road, Toronto; Corresponding Secretary, Miss Jessie Cooper, 30 Brunswick Ave., Toronto; Treasurer, Miss Julia F. Stewart, 12 Selby St., Toronto. Directors: Mrs. W. G. Struthers, 558 Bathurst St., Toronto; Mrs. A. H. Pafford, 194 Blythewood Road, North Toronto; Miss Mathieson, Riverdale Hospital, Toronto; Mrs. Mill Pellatt, 36 Jackes Ave., Toronto; Miss M. Ewing, 295 Sherbourne St., Toronto; Miss Eastwood, 206 Spadina Ave., Toronto; Mrs. Clutterbuck, 148 Grace St., Toronto; Miss Jean C. Wardell, R.N., 84 Delaware Ave., Toronto; Miss Eunice H. Dyke, City Hall, Toronto; Mrs. Yorke, 400 Manning Ave., Toronto; Miss G. L. Rowan, Grace Hospital, Toronto; Mrs. MacConnell, 127 Major St., Toronto; Miss Mary Gray, 505 Sherbourne St., Toronto; Miss J. G. McNeill, 52 Alexander St., Toronto; Miss C. E. De Vellin, The Alexandra Apts., University Ave., Toronto; Miss E. M. Norris, 82 Isabella St., Toronto.

Conveners of Standing Committees: Legislation, Mrs. Paffard; Revision of Constitution and By-Laws, Miss Dyke; Press and Publication, Mrs. Struthers. Representative to The Canadian Nurse Editorial Board, Miss E. J. Jamieson.

## THE ALUMNAE ASSOCIATION OF THE HAMILTON CITY HOSPITAL TRAINING SCHOOL FOR NURSES.

President—Miss Coleman, 171 James St. South.

Vice-President—Miss Dressel, 58 Charlton Ave. East.

Recording Secretary—Miss M. E. Dunlop, 175 Charlton Ave. East.

Corresponding Secretary—Miss E. F. Bell, 274 Charlton Ave. West.

Treasurer—Mrs. Reynolds, 143 James St. South.

"The Canadian Nurse" Representative—Misss Bessie Sadler, 100 Grant Avenue.

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At the regular meeting of the alumnae association it was decided to raise the general nursing fees to three dollars a day or twenty-one dollars a week, to take effect on Jan. 1st, 1914.

The next meeting of the alumnae, on December 2nd, is to elect officers for 1914. A nominating committee was appointed for this purpose—Miss A. Kerr, Miss E. Brennen, Miss Freemantle. All officers to be elected by ballot.

On Oct. 31, 1913, in Queen Alexandria Wing, Hamilton City Hospital, a son was born to Dr. and Mrs. F. Woodhall. Dr. Woodhall was a former interne at the H.C.H., and Mrs. Woodhall, nee Miss Touchburn, is a graduate of class 1909.

Nov. 5, 1913, in the Queen Alexandria Wing, H. C. H., twins (a boy and a girl) were born to Dr. and Mrs. Hopper. Dr. Hopper was a recent interne at the H. C. H.

**THE CANADIAN NURSES' ASSOCIATION AND REGISTER FOR GRADUATE NURSES, MONTREAL.**

President—Miss Phillips, 43 Argyle Ave.

Vice-Presidents—Mrs. Petrie and Miss Dunlop.

Secretary-Treasurer—Miss Des Brisay, 16 The Poinciana, 56 Sherbrooke Street West.

Registrar—Mrs. Burch, 175 Mansfield St.

Reading room—The Lindsay Bldg., Room 319, 517 St. Catherine St. West.

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**Treatise on History of Massage and Physical Culture, by Miss Manby**

From the earliest times, rubbing of some sort has been used for curative purposes. It is known to have been employed by the Chinese as far back at 3000, B.C., and it was probably from them that the Japanese learned the art, which is still much practised by both. Well known names all along the centuries are connected with it.

Herodicus (500 B.C.), the founder of medical gymnastics, compelled his patients to have their bodies rubbed; and from him we learn there were specialists even in those days.

Plato's writings abound with direct and indirect references to friction; and Socrates, by the mouth of Plato, esteems oil very necessary, referring to its uses in the way of friction, which, he asserts, is a great assuager of pain.

Hippocrates (400 B.C.) says "Rubbing can bind a joint that is too loose, and loosen a joint that is too rigid," thus bearing out the statement: "Things that have the same name have not always the same effect."

Julius Caesar (100 B.C.) had himself pinched all over every day, as a means of getting rid of neuralgia.

Celsus (a Roman physician at the beginning of the Christian era) advised that friction should be used several times a day in the sun.

The wisdom of the ancients appears to great advantage in some of their remarks about rubbing, and it requires years of practical acquaintance with massage in order to fully appreciate them. All the physicians and philosophers of antiquity knew no better means of strengthening the vital organs prolonging life than by moderation, by the use of free and pure air, by bathing, and above all by daily friction of the body and exercise. Rules and directions were laid

down for giving gentle and then violent motion to the body in a variety of ways, hence arose a particular art called gymnastics, and the greatest philosophers and men of learning never forgot that body and mind ought to be exercised in due proportion. This art of suiting exercises to the different constitutions, situations and wants of men, of employing it above all as a means of keeping his internal nature in proper activity, and thereby not only rendering the causes of diseases ineffectual, but also curing diseases which have already appeared. they indeed brought to an extraordinary degree of perfection.

The Greeks and Romans were not the only members of the Ayran family who practised rubbing in the early ages. The Indians esteemed friction highly—Strabo tells us that "they think most highly of friction, polishing their bodies smooth in many ways." The king, whilst receiving foreign ambassadors, was rubbed at the same time.

Amongst the hygienic principles laid down in the "Art of Life" in the early Sanskrit of the first century are these: "One ought to rise early, bathe, wash the mouth, anoint the body, submit to friction and shampooing and then exercise." The word shampooing is of Hindu origin, and however refreshing the process, and however applicable to the Turkish bath, it should not be used as a synonym for massage—which is a scientific and most effectual procedure.

Galen (A.D. 130-200) was the most learned physician and accomplished man of his age. He recommended friction in a great number of diseases, generally as axilliary to other means. He was deeply interested in exercises, and laid down very minute directions regarding their performance.

I would like to quote in his quaint and curious language just a few phrases: "If anyone," says he, "immediately after undressing, proceed to the more violent movements before he has softened the whole body, he incurs the danger of breaking or spraining some of the solid parts. But if, beforehand, you gradually warm and soften the solids, and thin the fluids and expand the pores, the person exercising will run no danger of breaking any part nor blocking up the pores. I do not counsel the immediate application of grease before the skin is warmed and the pores expanded, and I recommend the imposition and circumflexion of the hands to be varied, in order that all fibres of the muscles as completely as possible in every part may be rubbed"

Sudden and violent efforts at running, jumping and lifting, by those unaccustomed to them, especially if they have passed the meridian of life, are apt to cause rupture and strain of muscular and tendonous fibres, owing to a lack of suppleness in these tissues. It would be difficult to improve on the preventive treatment of such injuries advised by Galen. No wonder he took so much interest in exercise

and kindred measures for the improvement and maintenance of health, for history tells us that till the age of thirty he was weakly, but became strong and of good health by devoting several hours a day to bodily exercise, and in this way cured a host of sicknesses and weaknesses in others.

**To Take a Later Period**

Mary Queen of Scots was stricken down Oct. 7th, 1566, with a malignant fever, doubtless caused by fatigue and annoyance at the wretched conduct of her husband. She was very ill, and sank rapidly. Convinced that her last hour had come, she calmly prepared for death. She forgave all who had in any way offended her and craved pardon of all whom she had in the slightest way aggrieved. Soon she became cold and rigid, her form became straightened out, her pulse and respiration were no longer perceptible. All despaired of her life, save her physician "News," who, hoping against hope, continued to use friction, and at length succeeded in restoring her to life. She then began rapidly to improve, but her death had already been reported in Edinburgh.

Hoffman (1660-1742), who was physician to the King of Prussia, we are not likely to forget. He says that exercise is the best medicine for the body, and that we cannot imagine how favorable to health it is, for it excites the flow of spirits and facilitates the excretions from the blood.

A curious old book by the late John Grosvenor, surgeon of Oxford, England, is called "A Full Account of the System of Friction as adopted and pursued with the greatest success in Cases of Contracted Joints and Lameness from Various Causes" This John Grosvenor was undoubtedly a man of ability, for in addition to his extensive practice, he edited a newspaper during his breakfast hour, and rendered gratuitous services to the poor from 8 to 10 in the mornings. In the latter period of his practice, Mr. Grosvenor was celebrated throughout the kingdom for the application of friction to lameness or imperfections of motion arising from stiff joints. He had first cured himself of a morbid affection of the knee.

To Peter Henrik Ling, poet and physiologist of Sweden, is given the credit of having instituted what is so well known as the "Swedish Movement Cure," and in 1813 the Royal Central Institution was established at Stockholm in order that he might practise and teach his system of gymnastics, which was adapted to the well and the sick.

In 1877 Dr. Weir Mitchell, of Philadelphia, the eminent neurologist, gave the profession and public a careful and interesting account of his successful methods of treating thin, nervous, anemic and bed-ridden patients, usually women. The methods comprise an original combination of previously well-known agencies, viz., seclusion, rest and exces-

sive feeding, made available by rapid nutritive changes, caused by the systematic use of massage and electricity. The favorable results of Dr. Mitchell have been confirmed by Prof. Playfair, of King's College, London, and published under the title of "The Systematic Treatment of Nerve Prostration and Hysteria"—1883.

From this slight outline of the history of massage we may conclude that, like many other matters in and out of medicine, it has not been steadily progressive; at times being highly esteemed, at others treated with indifference.

Now, if I may go back and refer to that part of my paper which pertains to exercises and gymnastics, it is interesting to notice how very applicable the system I am demonstrating to-night is, the teachings of both ancient and modern schools of Therapy. They all practically agree that the prescription of exercise for each individual must be arranged according to the particular need, so that, while meeting and overcoming any deficiency, care must be taken to avoid any undue strain on the organs and muscles.

Another point upon which all who have studied this particular subject will agree, is that no persons, however healthy and strong, should perform sudden and violent exercises without first training their bodies in a gradual fashion. And this rule is complied with in the performance of the Muller system, because every exercise can be performed in various degrees of difficulty so that men and women, young and old, more or less vigorous, can perform the same exercise, and in which ever degree is best adapted to their use.

Deep breathing plays a very important part in the system, for precise directions are given as regards breathing both during and between the exercises, and it is just this point which is of such extreme importance, especially as regards the action of the heart.

No apparatus is required, and most of the exercises are specially directed towards strengthening and developing the internal organs and heart muscles. Deep breathing should be neither entirely abdominal nor thoracic, it should be a combination of the two, and the diaphragm should be used and as much breath taken in as possible.

The monthly meeting of the Canadian Nurses' Association was held on Tuesday, Nov. 4th, at 8 p.m., Miss Phillips in the chair. The minutes of the Annual Meeting were read and adopted. Twenty new names were added to the roll of membership. Miss Phillips then introduced the Misses Manby. Miss Manby read a treatise on The History of Massage and Physical Culture, and Miss I. Manby demonstrated. It was all intensely interesting, showing how very important rubbing in some form was held by the ancients. A vote of thanks was proposed by Miss Colley, seconded by Miss Hill, and carried unanimously.

There were 100 members present. Helen A. Des Brisay,
Sec.-Treas.

## VICTORIAN ORDER OF NURSES

In the last annual report of the Victorian Order of Nurses, the Chief Superintendent urged strongly that provision be made by each local association for more pre-natal visiting, and for the continuation of visits to the babies to the end of the first year at least. No means can be more effective in the child welfare campaign than those two suggested.

In this connection we wish to draw the attention of the Nurses to the monograph, entitled "Pre-Natal Care," the first of a series on the care of children, which is being issued by the Children's Bureau, Washington, D.C. This is written by Mrs. Max West and is very concise.

In it Mrs. West takes up Pregnancy, Personal Hygiene, dealing with diet during pregnancy, quantity of food, condition of bowels, exercise, clothing, care of skin, fresh air and ventilation, condition of breasts and care of the teeth; complications of pregnancy and how to avoid them, preparations of confinement, outfit for the baby, birth of the baby, care of baby, lying-in-period, nursing the baby, and diet for a nursing mother.

We are reproducing here the section on "Toxemia":

"As the child in the uterus grows there is constantly being sent back into the mother's blood an increasing amount of waste matter; if, in addition, the mother's own nutritional processes are imperfect and there is difficulty in eliminating all these waste products, a condition may result which will be more or less serious for both the mother and the child. This condition is called Toxemia. Some of the common symptoms of Toxemia are:

1. Serious or persistent vomiting.
2. Repeated headaches.
3. Dizziness.

4. Puffiness of face and hands.
5. Blurring of the vision.
6. Neuralgic pains, especially about the pit of the stomach.

It must be understood that one or more of these symptoms does not necessarily indicate that toxemia is present, for in many cases the cause of these disturbances may be very easily removed and result in nothing of any consequence. But when such symptoms appear they should always be brought to the attention of the doctor, and it will be well to send a specimen of the urine to him immediately. Prevention of the serious results of toxemia, by observing and reporting the symptoms which precede it to the doctor is of great moment to all pregnant women. There is a tendency among women to regard some of these disturbances as the necessary accompaniment of the condition. There is no truth in the old saying that "a sick pregnancy is a safe one," and it should be entirely disregarded. There is no possible virtue, in pregnancy or in any other condition, in enduring any pain or distress that can be prevented by proper means, and much harm may result from such neglect. Every pregnant woman should strive to keep in mind the plain and simple rules for health, the most important of which it may not be amiss to bring together here:

1. Guard scrupulously against continued constipation.
2. Avoid an excessive quantity of meat.
3. Drink a liberal amount of water.
4. Take plenty of out-door exercise and keep all the rooms of the house well ventilated day and night.
5. Bathe every day.
6. Wear light but suitably warm and comfortable clothing.
7. Sleep at least 8 hours out of the 24 and do not become overtired at any time.
8. Have the urine examined at stated intervals.
9. Strive to be happy, seek self-control and do not worry.
10. Consult the doctor when symptoms of illness persist.

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The Board of Foreign Missions of the Presbyterian Church in the United States are asking, through the secretary of the Student Volunteer Movement for Foreign Missions, Wilbert B. Smith, 600 Lexington Ave., New York city, for a woman physician for their mission station at Triuanfu, Shantung province, China. They ask for a physician with thorough medical training and considerable practice. She should also possess a sound constitution, good health, good sense, ability to work harmoniously with others, and the dominating purpose to make her life and work contribute directly to the Christian and religious aim of the mission.

## THE HEATHER CLUB

By Mrs. Clutterbuck

The Heather Club Chapter I. O. D. E.—the Toronto chapter composed of nurses and their friends—have just held a most successful bazaar, the proceeds to date being a little over eight thousand dollars ($8,000).

At 10.30 o'clock on the morning of October 30th, in Columbus Hall, the Lieutenant-Governor of Ontario, Sir John Gibson, after telling of the formation of this chapter as a committee from the Alumnae Association of the Hospital for Sick Children, of its growth and varied development, of the part played by Mr. John Ross Robertson in donating a pavilion in the grounds of the Lakeside Home, where eighty-seven children have been cared for this summer; of the later gift of Lieut.-Col. and Mrs. A. E. Gooderham to the I.O.D.E. in Toronto, of the co-operation of the School Nurses and of the Tuberculosis Nurses in this great work of prevention in our city, declared the bazaar open.

Too much can scarcely be said of the beauty of the heather-clad booths, containing household goods, fancy goods, dolls, aprons, handkerchiefs, baby clothes, candy, antiques, pictures, books, fruit and flowers, table delicacies, perfumes, etc, and of the bright-faced ladies, gowned in white, who presided at these booths. The fortune-telling gypsies, the Dutch girls in quaint costume, who presided over the tea-room, added to the picturesqueness of the scene, and then the bazaar was declared open and Lady Gibson and her daughter, Miss Gibson, attended by Major Caldwell, descended from the gallery and began to purchase, visiting from booth to booth, selecting and buying, and all the good ladies of Toronto and many of Toronto's gallant men followed her good example, and the crowds came and went all day long, and all evening, until the people on the streets near the bazaar thought it looked like the night before Christmas, because there were such bargains, everybody was carrying parcels.

And now the members of the Heather Club Chapter, who worked hard to make the bazaar a great success, are very happy, for they can show Lieut.-Col. and Mrs. A. E. Gooderham their appreciation of the gift of the Preventitium, where homeless children who have been exposed to tuberculosis will find a home, by endowing a cot—The Heather Club Chapter Cot.; to Mr. John Ross Robertson, by placing an endowment upon the Heather Club's Pavilion, where the same class of children, whose homes are in crowded districts in the city, enjoy a real holiday under the supervision of trained nurses during the summer months, and they can also more adequately help these children in their homes during the winter months, for now they have the funds to appoint a nurse, placing her in charge of the clinic in the Hospital for

sick Children, and in charge of the dispensing of help through the social workers.

Our most sincere thanks are due not only to all who provided and helped to make the bazaar but to every citizen who came and supported the effort.

There is room on our membership list for every trained nurse in Ontario.

You can be an active member for 50c. a year.

You can be an associate member for $1.00 a year.

You can be a sustaining member for $5.00 a year.

Or we will make you a life member if you send us $25.00, and you will get a report of our work each year and help in preventing tuberculosis in our land by caring for the children exposed before they become victims.

## THE SCHOOL NURSE

The accompanying cuts illustrate what has been accomplished in the way of open air schools in Toronto since the organization of medical inspection. The first picture shows the pupils at dinner in the open pavilion. Wholesome food is part of the open air school program.

The second is a picture of the pupils during the Rest Hour. All pupils are required to sleep from 1—3 p.m. It is proposed to establish four of these forest schools in Toronto in 1914.

Ten thousand tooth brushes and thirteen thousand tubes of tooth

Dinner at Forest School

paste were sold at cost to school children in Toronto during 1912 by the Department of Medical Inspection.

"The fear of future pain as a prod to urge children to the dentist is obsolete and should be discouraged."—Oral Health.

"He who helps a child helps humanity with a distinctness, with an immediateness, which no other help given to human creatures, at any other stage of their life, can possibly give them."—Phillip Brooks.

A paper on School Nursing, by Miss Stanley, of Cleveland, contains the following interesting paragraph:—

"One of our nurses performed a unique piece of work this term

in investigating homes of feeble minded, under the direction of the special examiner for backward and mentally defective pupils. A few homes of the more seriously retarded children were picked out for investigation. The object of this is to show by means of charts the appalling number of feeble-minded persons in family groups, and the urgent need for segregation.

In a family of four generations the nurse succeeded in getting reliable and accurate information on 52 relatives. Out of that number there were 24 feeble-minded individuals. The great grandmother was feeble-minded to start with. In this group there is alcoholism, prostitution, miscarriages, still births and criminality."

Rest Hour at Forest School

Beside visits to homes, other sources of information were studied through the Associated Charities, Humane Society, Probate Court, Bureau of Vital Statistics, physicians and ministers. The nurse gave one day a week to this field work and obtained material for five genealogical bills. They present striking pictures and show the need for the segregation of these poor unfortunates far more than statistics could. To a nurse who has made some study of the feeble-minded, there is a wonderful opportunity in this line of work."

The regular monthly meeting of the Canadian Public School Nurses' Association was held Monday, Nov. 3rd, at the Club House, Mrs. Struthers, the president, in the chair.

Articles descriptive of the work in other places were read by the committee on entertainment, and much appreciated as containing new and valuable suggestions.

Afternoon tea was served before adjournment.

The Toronto School Nurses will hold their annual At Home on January 16th, at the Metropolitan Assembly Rooms, College street. Dancing from 8 to 12 p.m. It is hoped that all members of the Association, whether in town or out, will accept this intimation and be present.

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## BIRTHS

Ludeke—On October 20th, 1913, on Bow Island, Alta., to Mr. and Mrs. E. C. Ludeke, a daughter. (Mrs. Ludeke was Miss Emma Veal, K.G.H.)

Hooper—On August 19th, 1913, at 121 Jasper street west, Edmonton, Alberta, to Mr. and Mrs. Frank C. Hooper, twins (girls).

Le Gallais—At Johnsville, P.Q., to Rev. and Mrs. Le Gallais, (Miss McGie, Class '07, R.M.H., Montreal), a son.

Coleman—At New Philadelphia, Ohio, to Dr. and Mrs. Coleman (Miss Campbell, Class '09, R.V.H., Montreal), a son.

Farrar—On August 29th, at Regina, Sask., to Mr. and Mrs. G. E. Farrar (Miss Alexander, Class '12, R.V.H., Montreal), a daughter.

Ross—At Strathcona Hospital, Toronto, Sept. 4th, 1913, to Mr. and Mrs. Oliver Ross, a daughter (Mrs. Ross was Miss Victoria Brewer, T.W.H.)

Whitelaw.—On October 20th, 1913, at Vancouver, B.C., to Dr. and Mrs. Whitelaw, a son. Mrs. Whitelaw (nee Miss E. H. Mackay) is a Graduate of the Royal Victoria Hospital, Montreal.

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## MARRIAGES

Colvin—Looney.—At the home of the bride's father, 2136 Gerrard Street East, on Oct. 29th, 1913, Annie Clara Looney to Mr. George Gladstone Colvin, of Toronto. Mrs. Colvin is a graduate nurse of the Hamilton City Hospital in the year 1904.

Walker—Sampson—In Westminster Church, Regina, Sask., on September 17, 1913, Miss Margaret Sampson, graduate of Midland General Hospital, and post-graduate of St. Michael's Hospital, Toronto, to Mr. John Stewart Walker.

## CENTRAL REGISTRY

The regular monthly meeting of the Central Registry Committee was held at the Registry Office, 295 Sherbourne street, Monday, November 3rd, at 8 p.m. In the absence of Miss Mitchell, the convener, Miss Argue occupied the chair. Eight members were present.

## REGISTRAR'S REPORT FOR OCTOBER

Calls—Personal, 271; Registry, 84: total number of calls, 355.

Three cases were helped from the Central Registry extention fund.

Eleven applications were brought before the Committee, nine of which were accepted.

Sorry to report the illness of one of our members, Miss McCredie, Graduate of the Toronto General Hospital; trust to hear of her speedy recovery.

## FINANCIAL STATEMENT

| | |
|---|---|
| Fees received in October | $370.00 |
| From Sale of Charts | 7.65 |
| | $377.65 |
| Disbursements | $185.50 |
| Balance in Savings Account | $1,424.02 |
| Balance in Current Account | 312.72 |
| On Hand | 10.50 |
| Total Balance | $1,747.24 |

## HOSPITALS AND TRAINING SCHOOLS OF CANADA

### British Columbia.

HOSPITAL—Royal Inland, Kamloops.
Established—1882.
Superintendent of Hospital and Nurses—Edith Patton.
Number of beds—One hundred and twenty.
Graduate nurses on staff—Six.
Pupil nurses—Seventeen.
Term of training—Three years.
Branches of training—Medicine, Surgery, Obstetrics, Maternity, Infectious Diseases.

### Manitoba.

HOSPITAL—The General, Dauphin.
Established—1900.
Registered—1901, in Winnipeg.
Superintendent of Hospital and Nurses—A. Isabel Laidlaw.
Number of beds—Twenty-four.
Graduate Nurses on Staff—None.
Pupil Nurses—Seven.
Term of Training—Three years.
Branches of Training—Medicine, Surgery, Obstetrics.

HOSPITAL—Freemason's, Morden.
Established—1893.
Registered—1893, in Winnipeg.
Superintendent of Hospital and Nurses—Evelyn M. Whitney.
Graduate Nurses on Staff—None.
Pupil Nurses—Nine.
Term of Training—Three years.
Number of beds—Twenty-three.
Branches of Training—Medicine, Surgery, Obstetrics.

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## THE NURSES' LIBRARY

"Index of Practical Nursing;" by J. Basil Cook, M.D., D.P.H., Senior Assistant Medical Officer, Kensington Infirmary. The Macmillan Company of Canada, Ltd., Toronto. The title explains the purpose of the book. The different procedures in the care of the patient are clearly and briefly explained. The text is so arranged as to facilitate reference.

"Essentials of Fever Nursing," by Lytton Maitland, M.D., (Lond.), B.S., D.P.H. (Camb.): The Scientific Press, Ltd., 28, 29, Southampton St., Strand, London, W.C., England. One shilling net.

A very small hand-book that gives the "most important, practical details of fever nursing."

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## MARRIAGES

Wallace-Robertson—On Saturday, Oct. 25th, in Toronto, Miss Isabel Robertson, Class 1913, R.V.H., Montreal, to Prof. Wallace, of Toronto University.

Chandler-Martin—On August 29th, at Charlottetown, P.E.I., Miss Martin, Class 1912, R.V.H., Montreal, to Mr. Fred Chandler.

Wherry-Coulter—On Tuesday, Nov. 4th, at St. Paul's Church, Bethany, Margaret Eleanor Coulter to Mr. Robert Wherry, Toronto. Miss Coulter is a Graduate of Grace Hospital, Toronto, Class 1907.

Harris-Rogan—At Reddlestone, Sask., June 25th, 1913, Minnie Rogan, T.W.H., to Mr. Wm. F. Harris, of Fort William, Ont.

Knechtel-Becker—At Proton Station, Ont., Sept. 10th, 1913, Bertha E. Becker, T.W.H., to Rev. John E. Knechtel, Edmonton, Alberta.

Gillispie-Gillis—On Monday, Oct. 27th, 1913, at the Church of the Holy Rosary, Vancouver, B.C., Miss Blanche Gillis, Graduate Boston City Hospital, to Michael Gillispie, of Vancouver.

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## DEATHS

Hooper—On August 30th, 1913, at 121 Jasper street west, Edmonton, Alberta, Mary Green, wife of Frank C. Hooper. Mrs. Hooper was a graduate of the Hospital for Sick Children, Class 1906.

Foley—Miss Helen Foley, Graduate of St. Michael's Hospital, Class 1906, died suddenly after a very short illness on Aug. 30th, 1913, at Dorchester, Mass.

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## ALUMNAE ASSOCIATION, GRACE HOSPITAL, TORONTO

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Board of Directors—Miss Rowan, Sloane, Warden, McPherson and Irvine.

Treasurer, Miss Carnochan, 566 Sherbourne St.

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Representatives on Central Registry Committee—M. E. Jewison, 552 Bathurst St.; Miss Irvine, 596 Sherbourne St.

Representative to "The Canadian Nurse"—M. E. Jewison, 552 Bathurst St.

Regular Meeting, second Wednesday of each month, 3 p.m.

## THE ALUMNAE ASSOCIATION OF THE TORONTO GENERAL HOSPITAL TRAINING SCHOOL FOR NURSES.

Honorary President, Miss Snively; President, Mrs. E. M. Feeny, 39 Grove Ave.; First Vice-President, Miss M. E. Christie; Second Vice-President, Miss Isabel Fergusson; Recording Secretary, Miss Bella Crosby, 41 Rose Ave.; Corresponding Secretary, Mrs. N. Hillary Aubin, 78 Queen's Park; Treasurer, Miss Georgie Henry, 153 Rusholme Road.

Directors—Mrs. A. E. Findlay, Miss Margaret Telfer, Miss E. E. Augustine.

Conveners of Committees—Social and Look-Out, Mrs. Mill Pellatt, 36 Jackes Ave.; Programme, Miss Janet Neilson, 295 Carlton St.; Registration, Miss Bella Crosby, 41 Rose Ave.

Representatives on Central Registry Committee—Miss C. A. Mitchell, Miss Laura Gamble.

Representative "The Canadian Nurse"—Miss Lennox.

Regular Meeting—First Friday, 3.30 p.m.

## THE ALUMNAE ASSOCIATION OF ST. MICHAEL'S HOSPITAL TORONTO.

President—Miss O'Connor, Supt. of St. Michael's Hospital; First Vice-President, Mrs. P. W. O'Brien, 126 McCaul St.; Second Vice-President, Mrs. Roach, 86 St. Patrick St.; Secretary, Miss Foy, 163 Concord Ave; Treasurer, Miss Christie, 330 Berkeley St.

Board of Directors—Miss Connor, 853 Bathurst St.; Miss McDonald, 423 Sherbourne St.; Miss Hinchey, 853 Bathurst St.

Representative on Central Registry Committee—Miss Christie, 330 Berkeley St.; Miss Crowley, 853 Bathurst St.

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Representative "The Canadian Nurse"—Miss Stubberfield, 1 St. Thomas St.

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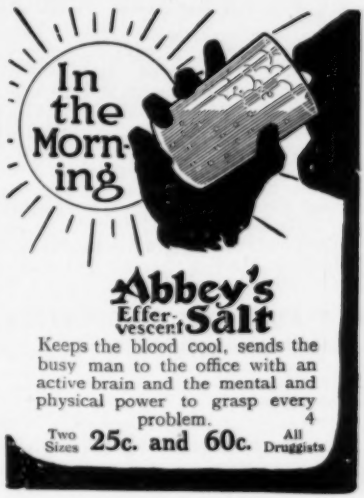


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These departments offer unusual opportunities. Special class work in Bacteriology, also lectures in Obstetrics and Pediatrics will be given, and other classes will be arranged according to demand. Residential privileges and a monthly allowance. Length of course dependent on work desired.

***For particulars address the Superintendent of the Training School.***

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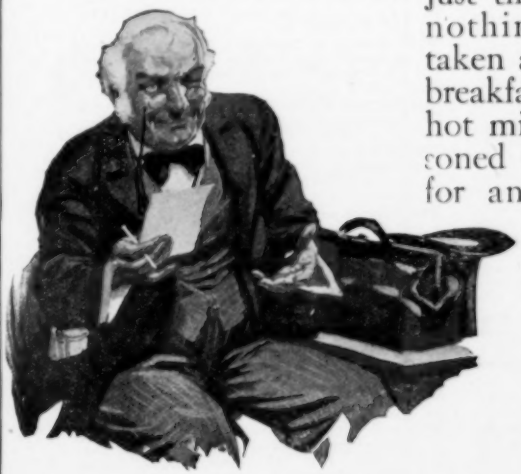

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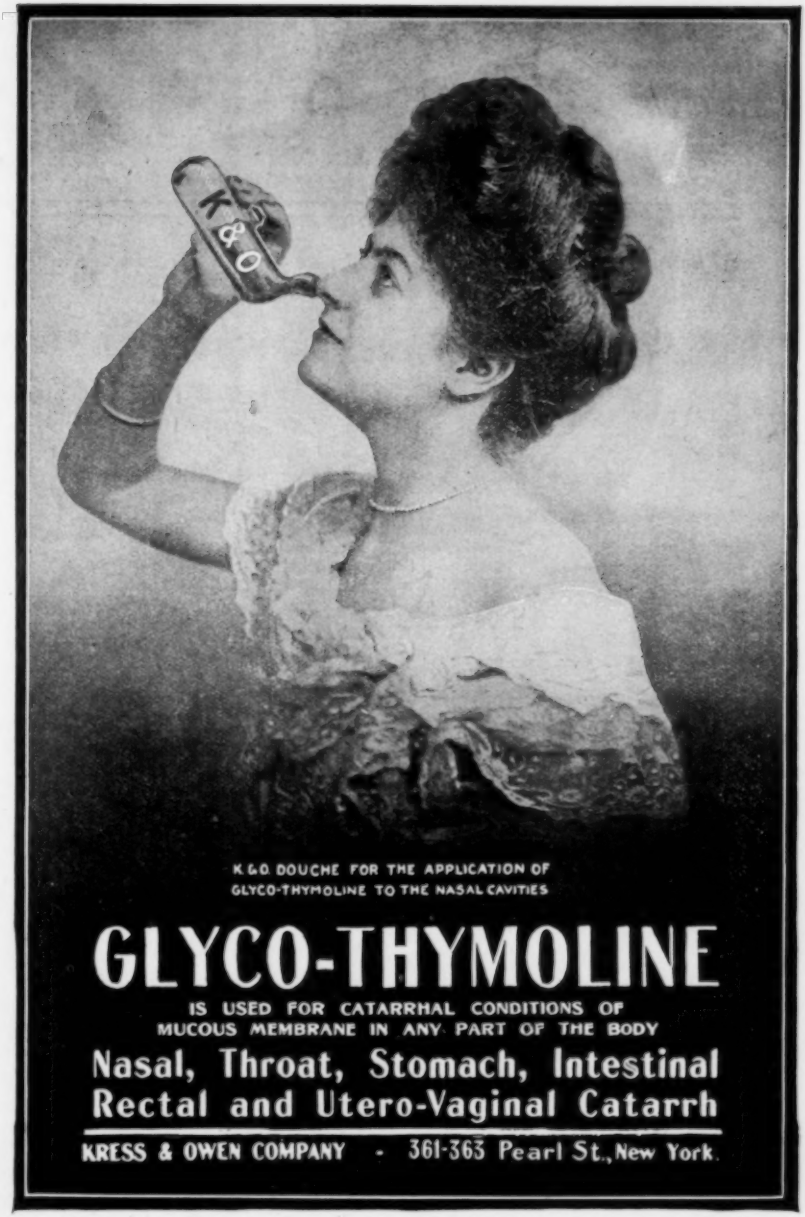
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